

PART B - FEE(S) TRANSMITTAL

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7590

06/13/2005

BAKER & HOSTETLER LLP
 Washington Square, Suite 1100
 1050 Connecticut Avenue, N.W.
 WASHINGTON, DC 20036

09/15/2005 MBEYENE2 00000145 10692688

01 FC:1501 1400.00 DP
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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/692,688	10/27/2003	John Schadler	87326.4080	2043

TITLE OF INVENTION: FEED SYSTEM AND METHOD FOR INTERLEAVING A BRANCH FEED ANTENNA WITH AN EXISTING SERIES FEED ANTENNA WITHIN THE SAME APERTURE CENTERLINE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1400	\$300	\$1700	09/13/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHEN, SHIH CHAO	2821	343-890000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Baker & Hostetler LLP

2

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SPX Corporation

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Charlotte, North Carolina

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
☒ Advance Order - # of Copies 3

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- ☒ A check in the amount of the fee(s) is enclosed. \$1709.00
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☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-2036 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature Leo J. Jennings

Date 9.13.05

Typed or printed name Leo J. Jennings

Registration No. 32,902

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